POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		25	06-06-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			

## **INDEX OF CLAIMS**

~	Rejected	N	Non-elected
	Allowed	l	Interference
_	(Through numeral) Canceled	Α	Appeal
	Restricted	0	Objected

÷	Hestricted U	Objected
Claim Date	Claim Date	Claim Date
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If more than 150 claims or 10 actions staple additional sheet here